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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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<b>FEE TRANSMITTAL</b> For FY 2006  <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		<b>Complete if Known</b>			
		Application Number	10/501,729		
		Filing Date	December 7, 2004		
		First Named Inventor	Gunter LABAN		
		Examiner Name	D. Lambkin		
		Art Unit	1626		
<b>TOTAL AMOUNT OF PAYMENT</b>		<b>(\$)</b>	<b>0</b>	Attorney Docket No.	42804-205435

**METHOD OF PAYMENT** (check all that apply)

<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> None	<input type="checkbox"/> Other (please identify): _____
<input checked="" type="checkbox"/> Deposit Account	Deposit Account Number: 22-0261		Deposit Account Name: Venable LLP	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)				
<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee			
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments			

**FEE CALCULATION** (All the fees below are due upon filing or may be subject to a surcharge.)**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

**2. EXCESS CLAIM FEES**

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims      Extra Claims      Fee (\$)      Fee Paid (\$)  
\_\_\_\_\_ - 20 = \_\_\_\_\_ x 50 = \_\_\_\_\_

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims      Extra Claims      Fee (\$)      Fee Paid (\$)  
\_\_\_\_\_ - 3 = \_\_\_\_\_ x 200 = \_\_\_\_\_

HP = highest number of independent claims paid for, if greater than 3.

**3. APPLICATION SIZE FEE**

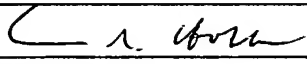
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets      Extra Sheets      Number of each additional 50 or fraction thereof      Fee (\$)      Fee Paid (\$)  
\_\_\_\_\_ - 100 = \_\_\_\_\_ / 50 \_\_\_\_\_ (round up to a whole number) x \_\_\_\_\_ = \_\_\_\_\_

**4. OTHER FEE(S)**Fees Paid (\$)

\$

**SUBMITTED BY**

Signature		Registration No. (Attorney/Agent)	36,830	Telephone	(202) 344-4000
Name (Print/Type)	Ann S. Hobbs, Ph.D.			Date	January 17, 2007



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:  
Gunter LABAN et al.

Application No.: 10/501,729

Filing Date: December 7, 2004

For: METHOD FOR PRODUCING  
THIOCTIC ACID

Art Unit: 1626

Examiner: Lambkin

Atty. Docket No. 42804-205435

Customer No.

26694

PATENT TRADEMARK OFFICE

**AMENDMENT UNDER 37 CFR 1.312**

Commissioner for Patents  
P. O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Prior to issue of the above referenced patent, amendment is requested as noted below.

Amendments to the claims begin on page 2.

Remarks begin on page 4.

Please charge any necessary fee or credit any refund to our deposit account no. 22-

0261.